

This checklist must be used with **PS-STB-S804-015-EN** procedure for STA Compact® and STA Compact® CT.
It must be used with **PS-STM-S804-004-EN** procedure for STA Compact Max®.

Preventive maintenance:	Yearly preventive maintenance:	Serial Number:
Field Service Engineer Name:	Date:	Signature:
Customer Name:	Date:	Signature:
Original: Customer - Copy: Field Service Engineer		

	Verification	Once a year **	Each PM*	Verification	Once a year **	Each PM*
4.1	General history of the system		<input type="checkbox"/>	4.9 Verification of the valcor pump flow		<input type="checkbox"/>
4.2	Consultation then purge of the error history		<input type="checkbox"/>	Needle 1: <input type="text"/> ml (from 3 ml to 4 ml)		
4.3	Updates		<input type="checkbox"/>	Needle 2: <input type="text"/> ml (from 3 ml to 4 ml)		
4.4	Cleaning: Measurement plate Drawers Cuvette loader Radiator Movements (X, Y, Z and P axes)		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Needle 3: <input type="text"/> ml (from 3 ml to 4 ml) Verification of the needles jet		<input type="checkbox"/>
4.5	Decontamination of the upstream fluidic circuit		<input type="checkbox"/>	4.11 Verification of the well vacuum «d» according to the altitude: From 0 to 500m, d ≥ 700mbar		<input type="checkbox"/>
4.6 4.8	Replacement of the syringe head tubing Replacement of the Teflon tip and syringe o-rings Replacement of the 3 needle EV tubings Replacement of the suction tip Replacement of the photometry box filter Paper filter Replacement of the air filter on PC rack Replacement of the piercing EV tubing Prehension liquid filter STA® CleanerSolution reservoir liquid filter		<input type="checkbox"/> <input type="checkbox"/>	From 501 to 1500m, d ≥ 600mbar From 1501 to 2000m, d ≥ 550mbar Well 1: <input type="text"/> mbar Well 2: <input type="text"/> mbar Well 3: <input type="text"/> mbar		
				4.13 Magnetic stirring of reagents		<input type="checkbox"/>
				4.14 Fans		<input type="checkbox"/>
				4.15 Safety and emergency stop devices checks: Front panel reed switch		<input type="checkbox"/>

- * When the preventive maintenance is done, tick off the "PM" box.

**** When the yearly maintenance is done, tick off the "Once a year" box.**



PS-STB-S803-016-en-x (or PS-STM-S803-03-en-x) biological test results have to be attached to the intervention sheet.